



# Invoice

**TRANSPORTE PORTO BRAZIL LTDA**

**Date:** May 05, 2025

**Invoice:** 20250505652

**To:** BRAVE MARITIME CORPORATION INC

**Address:** KIFISIAS AVENUE

**PO - VESSEL:** ST8109-CAPE HORN

**Description**

M/A - CAR TRANSPORTATION BOAT STATION x CLINIC	USD 90,00
M/A - CAR TRANSPORTATION CLINIC X BOAT STATION	USD 90,00
<b>Total</b>	<b>USD 180,00</b>